
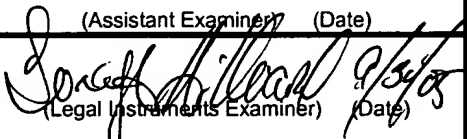




<b>Issue Classification</b> 	<b>Application/Control No.</b>	<b>Applicant(s)/Patent under Reexamination</b>	
	09/421,108	HSU ET AL.	
	<b>Examiner</b>	<b>Art Unit</b>	
	JAGDISH PATEL	3624	

ISSUE CLASSIFICATION										
ORIGINAL					CROSS REFERENCE(S)					
CLASS		SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
705		37			705	26	27			
INTERNATIONAL CLASSIFICATION										
G	0	6	F	17/60						
				/						
				/						
				/						
				/						

 (Assistant Examiner) (Date)		 Jagdish N Patel 9/29/05 (Primary Examiner) (Date)		<b>Total Claims Allowed: 55</b>	
(Legal Instruments Examiner) (Date)				O.G. Print Claim(s) 1	O.G. Print Fig. 1

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA				<input type="checkbox"/> T.D.				<input type="checkbox"/> R.1.47			
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original		
	1		31		61		91		121		151		181		
	2		32		62		92		122		152		182		
	3		33		63		93		123		153		183		
	4		34		64		94		124		154		184		
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	9		39		69		99		129		159		189		
	10		40		70		100		130		160		190		
	11		41		71		101		131		161		191		
	12		42		72		102		132		162		192		
	13		43		73		103		133		163		193		
	14		44		74		104		134		164		194		
	15		45		75		105		135		165	1	195		
	16		46		76		106		136		166	2	196		
	17		47		77		107		137		167	3	197		
	18		48		78		108		138		168	4	198		
	19		49		79		109		139		169	11	199		
	20		50		80		110		140		170	12	200		
	21		51		81		111		141		171	5	201		
	22		52		82		112		142		172	6	202		
	23		53		83		113		143		173	7	203		
	24		54		84		114		144		174	8	204		
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	26		56		86		116		146		176	10	206		
	27		57		87		117		147		177	13	207		
	28		58		88		118		148		178	14	208		
	29		59		89		119		149		179	15	209		
	30		60		90		120		150		180	16	210		

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ISSUE CLASSIFICATION									
ORIGINAL				CROSS REFERENCE(S)					
CLASS	SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
INTERNATIONAL CLASSIFICATION									
			/						
			/						
			/						
			/						
			/						

(Assistant Examiner) (Date) <i>[Signature]</i> 9/30/05 (Legal Instruments Examiner) (Date)		<i>[Signature]</i> + 9/29/05 (Primary Examiner) (Date)		Total Claims Allowed: 55 O.G. Print Claim(s) 1 O.G. Print Fig. 1	
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<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA				<input type="checkbox"/> T.D.				<input type="checkbox"/> R.1.47			
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19	213	47	243		273		303		333		363		393		
20	214	48	244		274		304		334		364		394		
0	215	49	245		275		305		335		365		395		
21	216	50	246		276		306		336		366		396		
22	217	51	247		277		307		337		367		397		
23	218	52	248		278		308		338		368		398		
24	219	53	249		279		309		339		369		399		
25	220	54	250		280		310		340		370		400		
26	221	55	251		281		311		341		371		401		
27	222		252		282		312		342		372		402		
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31	226		256		286		316		346		376		406		
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